## BEST AVAILABLE COPY

## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2004

Application or Docket Number

10/720934

(Column 1) (Column 2)								SMALL ENTITY			OTHER THAN OR SWALLENTITY		
TOTAL CLAIMS			1	11 +3	1	UITH 21		RATE	<del></del>	. Os		<del>.,</del>	
500				<del></del>	-			<del> </del>	<del></del>	-	RATE	FEE	
FOR			NUMBER FILED		NUM	BER EXTRA		BASIC F	EE 395.00	OR	BASIC FEI	790.00	
ľ	OTAL CHARGE	EABLE CLAIMS		minus 20=		·		X\$25		OR	·X501=.		
-	DEPENDENT	· · · · · · · · · · · · · · · · · · ·	aninus 3 =		•			X top=		OR	X200=		
N.	ULTIPLE DEFE	ENDENT CLAIM	PRESENT			<u> </u>		+150=		OR	+300=	1	
* If the difference in column 1 is less than zero, enter "0" in column 2							1	TOTAL		OR	TOTAL		
		CLAIMS AS	AMENDE	MENDED - PART II				:	•	<b>-</b>	OTHER	THAN	
		(Column 1)		(Column 2) (				SMALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENTA	1/28/05	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER BUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI TIONAL FEE	
NON	Total	. 25	Minus	- 25	5	= /		X <b>25</b> =		OR	X\$50=		
AME	Independent	ENTATION OF N	Minus	3	) - C. 1111	<u> -/ </u>	•	×100:	/	OR	X200=		
<u></u>	ring rines.	OCTIPLE DE	PENUENT	CLAIM			+150=	1	OR	<b>3</b> 00=			
	·						A	TOTAL		OR	TOTAL ADDIT. FEE		
		(Column 1)	(Column 2) (Column 3)										
AMENDMENT B	·	CLAIMS REMAINING AFTER AMENOMENT	·	HIGHE NUMS FREVIO FAID F	ER USLY	PRESENT EXTRA		FATE,	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	f-st		<u></u>		χ25=		OR	X50=	· i	
<b>AME</b>	Independent	*	Minus	200		=		X 100=		OR	X200=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT O				CLAIM		*	+150=		OR	+300=		
								TOTAL		<u> </u>	TOTAL		
	·							DOTT. FEE	L	OR,	DOM. FEE		
		(Column 1)	<del></del>	(Colum		(Column 3)							
AMENDMENT C		CLAIMS REMAINING AFTER - AMENOMENT	• • • •	HIGHE NUMBI PREVIOL PAID FI	er Jsly	PREȘENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL ,FEE	
	Total	•	Minus ·	##		= :		X25'=		OR	X\$50=		
	Independent	AUTATION OF 1 =	Minus	***	· ]			x <u>i</u> w = -		OR	X200:		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									.	+300=		
• #	<ul> <li>If the entry in column 1 is less than the entry in column 2, write "O" in column 3.</li> <li>If the "Tighest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."</li> </ul>									OR L	TOTAL		
	the Highest Nu	fiber Previously Pa ber Previously Pak	LI FOC IN THE	S SPACE & I	less than	3. enter -> *		OIT. FEE L	copriate box	~	DOIT. FEEL ma 1	·	
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